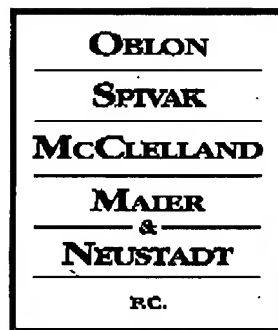


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TO	EBC	November 13, 2007
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NUMBER OF PAGES INCLUDING COVER: 3		CONFIRM FAX: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
FROM	Aida Melaku	248420US
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DIRECT PHONE #		YOUR REFERENCE 10/774,367

MESSAGE

Attached hereto please find: 1) A copy of the signed Issue Fee Transmittal Form submitted via EFS-Web and 2) A copy of our American Express Credit Card Payment Form.

These documents are being sent because the Issue Fee paperwork was submitted but we were unable to make payment due to PTO payment server failure.

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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** **Mail Stop ISSUE FEE.**
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or Fax **(571)-273-2885**

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(Depositor's name)
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(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/774,367	02/10/2004	Hiroki Ohlubo	248420US2	1118

TITLE OF INVENTION: OPTICAL WRITING SYSTEM AND METHOD, AND IMAGE FORMING APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	11/15/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
MARTINEZ, CARLOS A	2853	347-238000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
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1 Oblon, Spivak,
 2 McClelland, Maier
 3 & Neustadt, P.C.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THIS PATENT (print or type)

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(A) NAME OF ASSIGNEE

Ricoh Company, Ltd.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Tokyo, Japan

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Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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Authorized Signature

Joseph Scafetta, Jr.

Date

NOV 12 2007

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